

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Insurance Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

Joseph J Beneducci

Mailing Address 3577 Alkirst Ct

City State Zip Code
 Santa Rosa CA 95403-1769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fireman's Fund Insurance
Company

Occupation

Senior Vice President; Commercial Insu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 2 / 2 0 0 6

Transaction ID: 7261400601135216150

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

Gary Bhojwani

Mailing Address 777 San Marin Drive

City State Zip Code
 Novato CA 94998-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fireman's Fund Insurance
Company

Occupation

President-Personal Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 2 / 2 0 0 6

Transaction ID: 9339520601135253355

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Robert Courtemanche

Mailing Address 43 Ogden Plance

City State Zip Code
 Morristown NJ 07960

FEC ID number of contributing
federal political committee.

C

Name of Employer
President, Personal Insur-
ance

Occupation

Allianz of America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 2 / 2 0 0 6

Transaction ID: 1540180601135155728

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)